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DR. EDSALL

AND THE

DEVELOPMENT OF THE SCHOOL

October, 1935

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(Agranulocytosis: Ann. Int. Med., July, 1935)

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David L. Edsall, Dean of Harvard Medical School, 1918-1935.

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Dr. Edsall and the Harvard Medical School

By Hans Zinsser, M.D.

WHEN Dr. Edsall became Dean of the Harvard Medical School in 1918, the situation in medical education throughout the United States was one of active reorganization. Only those who lived through this period as members of medical faculties can fully appreciate the magnitude of the problems involved in the movement initiated by the Flexner Report of 1910.

Thanks to the wisdom and foresight of President Eliot and the eminence of a group of leaders including Doctors Fred Shattuck, Cannon, Folin, Cushing and others, the Harvard Medical School, like that of Johns Hopkins, had been for some years moving in the direction of the new conceptions, and stood in need of far less revolutionary change than most of the other American institutions. It is well not to forget that this preparedness of Harvard for the new era in American medical thought was made possible as much by the unselfish spirit of men in the older clinical school, men like Shattuck and Bradford, as it was by the foresight of the leaders.

When Dr. Edsall became Dean, the period of readjustment and expansion was in full cry and, as always in times of reaction, there was danger of overshooting the mark, of rushing headlong in directions suggested more by the condemnation of old defects than by wise considerations of future reconstructions. Problems of the reorganization of hospital relations, the "full-time" clinical question, the adjustment of preclinical departments to the expanded clinical laboratories, the function of medical schools in relation to public health—all these matters were unsolved and in view of the golden shower of financial support pouring in during these years, were calling for prompt and sound solution.

Dr. Edsall came when he was most needed, and at a moment when by training and temperament he was exceptionally prepared for the task. He had been Professor of Pharmacology at the school in Philadelphia, was one of the younger group of scholars who, under the leadership of Christian Herter and Lusk, were introducing precise studies of metabolism into American physiology. In other words, he was a trained laboratory worker who, entering clinical study, became one of the pioneers among academic clinicians as we now understand the term. He was thoroughly familiar, therefore, with the points of view both of the investigator and the clinician. In consequence, while in complete sympathy with the new enthusiasm for the scientific method in clinical study, he escaped the pitfall of total disregard for the art of medicine, which was threatening to transform, and in some cases did transform, a number of excellent laboratory investigators into mediocre professors of medicine.

At the Massachusetts General Hospital, before Dr. Edsall became Dean, his influence had already begun to bear rich fruit. It can be said of him, as of few others of this period, that he created a school, perhaps the most significant mark of a great teacher. If the later Harvard school of clinicians became unusually strong in men who combined investigative insight with clinical skill, men like the late Francis Peabody, like George Minot, J. H. Means and a number of others, here and elsewhere, it is to a great extent an achieve-

ment of the influence of David Edsall.

He pretended to no specialized knowledge outside the fields of his experience, but trusted the integrity and sagacity of those in charge of the several disciplines. He frequently sought advice, and gave it only when asked, and then helpfully and considerately. To requests for financial support for research and teaching purposes of importance, he responded like a good comrade whose pride lay in the success of any worthy effort. He realized that investigation and teaching were inseparably interdependent in the laboratories of a university, and that successful administration implied sympathy with the ambition of scholars to develop productive departments as well as teaching organizations. He was keenly coöperative in the encouragement of younger men of talent who were brought to his attention. He always found —and how did he do it?—the extra five hundred dollars to bring a nearly completed project to its ultimate accomplishment.

In short, David Edsall was a "Dean" in oiling the machinery, and a wise and loyal colleague in the pursuit of our profession. For those of us who directed laboratory departments, the success of his administration expressed itself in the well-supported and undisturbed manner in which we were enabled to carry on our chosen work.

The School During the Twentieth Century

Reginald Fitz, M.D. '09

TO BE DULY inspiring, history must appear colorful and be appropriately tinted with the imagination and vision of strong personalities. The story of the Medical School during Dean Edsall's time illustrates this very well, though it is difficult to know where the tale had best begin, for it is part of a continuous narrative. While the fact of the matter is that Dr. Edsall became dean of our School in 1918 and retired in 1935, to my mind a proper account of his deanship covers a much longer space of time.

As I interpret Dr. Edsall's career at the Harvard Medical School, I should begin it on the evening of May 1, 1909. It was on this evening that our faculty assembled at the Medical School to attend its last meeting under the leadership of President Eliot.

It was a solemn and dignified occasion. Dr. Shattuck made a characteristically graceful and whimsical speech in which he complimented Mr. Eliot on all that had happened during his presidency and ended by saying with much feeling, "It seems not inappropriate for the Faculty of Medicine to paraphrase the words of Saint Luke, the physician. 'All generations of Harvard men shall call thee blessed.' *Ave sed non vale!*"

Mr. Eliot's reply to his medical faculty may be looked upon as the curtain-raiser with which the School set the stage for what Dean Edsall later was able to accomplish. The speech is too long to quote *verbatim* but certain parts of it will bear repeating. Imagine, therefore, President Eliot in the Faculty Room of the School, dignified and forceful, saying in his deep, beautifully modulated voice:

"It is a fact that ever since the year 1869, when I became President, the promotion of the welfare of the Medical School has been one of my keenest interests. That is not unnatural for I was brought up as a student of chemistry, and it was in the Medical School that I gave,

when only twenty-two years of age, my first course of chemical lectures as a substitute for Professor Cooke.

"The Medical School interested me from three points of view: first, all its work lay within the field of natural science; secondly, the purpose and object of its instruction were improvements in the conditions of human life, individual, family, industrial and social; thirdly, its methods of instruction were capable of infinite improvement.

"Sometimes we think critically of the old Medical School as a private venture; and indeed it was an establishment in which the principal teachers had a small pecuniary interest in the days when it was possible for a medical school to have a divisible surplus, but this was not their main interest. The older generation of medical teachers in Harvard University were actuated by many of the same motives which inspire their successors today, and I am glad to bear witness to that fact.

"Medicine has long been, to my thinking, the most altruistic of the professions, but the profession has developed in recent times a second method of serving the people greatly, the method of medical research. The members of the medical profession, both those who are engaged in the actual treatment of sick and injured persons, and those who are studying the sources of disease and the modes in which diseases are transmitted and spread abroad, are actuated by the desire to make the world a little wiser, safer and happier because they have lived in it. This is the spirit in which this Faculty has worked and is proposing to work.

"It seems to me that the coming years have in them more possibilities of progress in medical education than any of the past years have had. Money is going to be poured out for the promotion of medicine and especially of preventive medicine. I congratulate you, as members of this fortunate and strong body, on your prospects of happy productive work."

There is no doubt that the turn of the century marked a renaissance of activity in medical thought in this country and the beginning of that amazing period foreseen by President Eliot when money for the promotion of medicine was easily to be obtained. Apparently several factors played a part in starting this era of medical prosperity at Harvard.

In the early summer of 1897, an intelligent layman passing his summer in the Catskill highlands read word for word a copy of Osler's Textbook and thereby generated the Rockefeller Institute and Foundation. In 1902, the Council on Medical Education of the American Medical Association was set up and by 1907 had inspected and classified all of our schools then existing, pointing out the urgent need for reform in our process of training doctors. In 1905 was established the Interurban Clinical Club and at its first meeting in Baltimore, the Johns Hopkins Medical Clinic, its teaching methods, its research problems and so on were fully paraded. Among those seeing the sights were Richard Cabot, Edwin Locke and Joseph Pratt of Boston and also David Edsall.

In the spring of 1908 the "Young Turks", a group of young men a little bored with the austere and formal discussions of the Association of American Physicians, staged a revolt and formed an organization of their own to cultivate clinical research. Thus came into being the American Society of Clinical Investigation. Among its founders were Henry Christian, Edwin Locke and Joseph Pratt of Boston and also David Edsall. In the autumn of 1908, the trustees of the Carnegie Foundation appropriated enough money for a further study of medical schools and placed the ticklish job of their inspection in the hands of Mr. Abraham Flexner. His monograph was published in 1910, and in the fall of that year President Lowell became a member of this Board.

One should give a great deal of credit to the Interurban club, to the hospital of the Rockefeller Institute, to the "Young

Turks", to Mr. Abraham Flexner and to the Carnegie Foundation for shaking loose the Harvard Medical School from its firmly established Bostonian complacency.

It seems only yesterday that it was twenty-five years ago and I was a house-officer at the M. G. H. The Interurban Club was to meet there and everyone at the Hospital from senior visiting man down was tearing his hair because there was so woefully little going on that could be made of interest to a group of that kind. It seems only yesterday, too, that Mr. Flexner's report came out and started all of my generation thinking. The Harvard Medical School, he said, had unexcelled laboratories. Abundant clinical material was available at the Massachusetts General Hospital, the City Hospital and elsewhere, but serious restrictions were evident. While the University was free to secure laboratory men whenever it chose, it was practically bound to make clinical appointments by seniority or to leave its professor without a hospital clinic. In general, it was customary that the heir to the hospital service was heir to the University chair, and in consequence there was a noticeable lack of sympathy between the laboratory and the clinical men. They did not represent the same ideals. An institution of our rank should work in most intimate cooperation with a hospital. The same principles should obtain in selecting clinical teachers as prevailed elsewhere in the University.

In the fulness of time, Henry Christian, Richard Cabot, Edwin Locke and Joseph Pratt, familiar with active teaching clinics in other cities through Interurban club meetings, returned to preach in Boston the gospel that here were abundant facilities at hand for the investigation of disease if only we had sufficient sense and vision to avail ourselves of the opportunities. Francis Peabody went to the Rockefeller Hospital and demonstrated to skeptical New Englanders that there was such a thing as serious clinical research. The "Young Turks" met each year and had interesting programs. More interesting still were the friends one made at these meetings from other parts of the country; the men with whom one talked in hotel corridors and bedrooms until far into the night about clinical investigation, full-time medicine and the academic life.

While the men of my age were deeply stirred by these undercurrents, it is evident that our seniors also were thoroughly alive to what was going on in the way of medical progress. Great changes at Harvard were destined to take place; a new generation of key-note professor was soon to be chosen. Little by little began the transition through which the Harvard Medical School passed from a comparatively small and unimportant New England school to its present position.

In 1906 Walter Cannon became Professor of Physiology; in 1908 Henry Christian became Professor of Theory and Practice and Dean; in 1909 Otto Folin became Professor of Biological Chemistry and Milton J. Rosenau, Professor of Preventive Medicine and Hygiene; in 1910 Harvey Cushing became Professor of Surgery; in 1912 another important position had to be filled, for in that year Dr. Frederick C. Shattuck was to retire from the M. G. H. and the Jackson professorship of Clinical Medicine.

There was a great deal of discussion as to who should fill this chair. The Massachusetts General Hospital decided to reorganize on a modern basis. The School and Hospital, having cast sheeps' eyes at David Edsall for the preceding two or three years, rating him as being the proper sort of man for undertaking this position, were delighted to make it possible for him to accept the call to Boston as Dr. Shattuck's successor.

The year 1912 was notable in the history of the School in another way, for it marked the opening of the Peter Bent Brigham Hospital. With the opening of this hospital, soon to be followed by the opening of the Children's Hospital and of the Infants' Hospital, the School had be-

come the center of a group of hospitals conducted in full accord with it, thus bringing about an important development towards expansion. We had in large measure outgrown Mr. Flexner's criticism and now had intimate enough coöperation with our teaching hospitals to be able to select clinical teachers on the same principles as prevailed elsewhere in the University.

Finally, 1912 was important historically because in that year Dr. Christian resigned as Dean. By this time, to run the School was a large task, and Dr. Christian wished to devote his energies to the medical service of the Peter Bent Brigham Hospital and to his professorship of the Theory and Practice of Physic. Perhaps this action foreshadowed the impossibility that one man could serve effectually for long in two so important capacities as Professor of Medicine and Dean of the Medical School.

Dr. Bradford was the next dean and held this office from 1912 to 1918, a period especially emphasized by the War. About half the teaching staff went away to public service of one kind or another. In spite of this, extra teaching was carried on and school work was continued in the summer months so that our students might graduate more quickly, to be available in case of need, and several important investigations dealing with public welfare were completed. During the War years the School made a good record under pressure.

In 1918, Dr. Bradford resigned and Dr. Edsall was made Dean, becoming full-time Dean in 1923. He began his deanship at an interesting period in the School's history; at a time when medical education in general was under scrutiny, with a relatively new President at the head of the University, thoroughly familiar with the current trend of medical thought, with a relatively new team of ambitious professors in the most important faculty positions, with a horde of oncoming junior teachers and students imbued with the desire for better and broader opportunities for development and education than ever had been offered before. For the first year evidently Dean Edsall laid low and said little, keeping his eyes and his ears open. However, at a faculty meeting on April 7, 1919, after he had been in office long enough to develop convictions about the School and its peculiarities, he unlimbered his guns and went into action.

Of all Dr. Edsall's speeches, with which I am familiar, his speech on that day is to me the most interesting for in it he described the School as he saw it, he laid bare his hopes for its future development, and suggested methods by which these hopes might be fulfilled.

As he visualized the situation, our School without doubt had greater potential opportunities for leadership than almost any other school in the country and if successfully managed should attain this leadership. At the moment, various problems faced us and of these the most stringent was the financial one. When Mr. Flexner made his inspection in 1908 our annual budget was $251,389. When Dean Bradford resigned in 1918 the budget had increased only to $270,000. In the meantime the cost of living had gone up greatly and there had been in the School a large growth of special departments and important new hospital connections so that a budget which seemed relatively large at one time had been stretched to cover so many objects that it now was spread too thin. It was essential that the School obtain more funds.

It also seemed to Dean Edsall that a curious situation had arisen as a result of the recent increased interest in medical education. Everyone agreed that in times past the chief progress in medicine had been through the fundamental medical sciences rather than through the clinical branches and it seemed reasonable to predict that future medical progress would largely spring from these sources. Yet in 1918 the clinical teacher had come to have too high a market value in the economy of medical education, not because he was more valuable intrinsically, but because he

could make money more easily. In several medical schools the salaries of the clinicians and their assistants had been set too high and the budget for clinical research was too large. Already young men of scientific training and interest were being directed into clinical branches rather than to the laboratory, because they could obtain there the science they desired and could still make a large income by practice as a refuge if academic advance did not come. Unless this tide were turned there was the threat of really serious damage in the future.

As things were then going in our School, we had a senior staff of very conspicuous ability in the medical sciences; but in recent years such men had become discouraged and had found the way extremely difficult, being forced to depend chiefly upon their individual exertions because of lack of funds with which to pay competent assistants. Unless we were careful, we were liable to lose some of our best teachers.

The clinical teachers were in a somewhat different position. Any plan that would immediately make all our clinical departments equally well organized for research and teaching would be vastly expensive, and the large number of scattered hospitals managed by boards having no organic connection with the School made cohesive and well-systematized effort difficult.

There was a dominant opinion among educators, however, that those who conducted the affairs of the major clinical departments in medical schools should devote the greater part of their time and thought to University duties. Dr. Edsall agreed with this opinion, yet to his mind the development of a rigid and inflexible full-time system at Harvard did not seem wise.

In regard to the immediate future of the School, Dr. Edsall believed the soundest financial policy to adopt in the existing emergency was as follows: any funds available should be kept mobile, being applied as seemed indicated for temporary purposes that were desirable and not permanently allocated to any single department. If large funds were necessary to secure or to hold an outstanding individual or to carry on some extremely important piece of investigation, mobile funds could be temporarily used for these purposes. New funds, Dr. Edsall predicted, would come to the school almost entirely as the result of the quality and interest of the work completed here. Every effort, therefore, should at once be made to create distinctive departments capable of doing distinctive work. Whatever money was available should be concentrated to build up one or two conspicuously strong departments. Dispersion of money over many objects, he said, was apt to show very little result. If money came to the School in the course of time, as he believed it would, such money could be used for building up, one after another, additional distinctive, strong departments.

In general, as can be seen, what Dr. Edsall had in mind when be became Dean was to make the School famous for its service to the public, hoping thereby to acquire financial support with which to make the School increasingly a more forceful and dominating influence in American medicine.

What actually took place is equally striking. The policy which Dean Edsall outlined to the Faculty on April 7, 1919, was largely adopted and followed out. As everyone agrees, it proved successful.

To the ordinary man, figures are not especially interesting. Suffice it to say that the annual budget of the School grew little by little, year by year, during Dr. Edsall's administration, until in 1935 it was nearly four times as large as it was in 1918. These years were the golden age in American medicine, for in this period, true to President Eliot's prediction, money was poured out for the promotion of medical knowledge all over the country.

Such increasing prosperity, naturally, has proved immeasurably helpful. Physically, certain gross changes have occurred which give the School buildings and near-

by land a different appearance from that of 1918. In the first place, certain badly needed repairs and reconstructions have been made in the School buildings. The Public Health School occupies the building originally put up to house the Infants' Hospital and this in turn has become amalgamated with the Children's Hospital. The Beth Israel Hospital and the Lying-In Hospital have been moved to the vicinity of the School, thus surrounding it with additional clinical facilities. Vanderbilt Hall, which has grown up on Louis Pasteur Avenue opposite the School, has proved a great blessing to the students, with its dormitory, where they can be comfortably housed and fed, and where they can play tennis in summer and basket-ball or squash in winter. A good library, too, which students and Faculty alike make much of, has been established on the second floor of the Administration building.

Spiritually—and this is more important than any physical growth,—the personality of the School has changed. Gone are the days of uncertainty, apprehension and dissatisfaction on the part of many of the staff, and instead there has arisen a general feeling of stability, confidence, loyalty and reasonable contentment, which is reflected from department heads downwards. Such a spirit, so intangible, and so difficult to define, and yet one of the reasons why many people like to work in the Harvard Medical School, has been a not unimportant factor in attracting eminent new Faculty members to the School and in holding others who have been urged to go elsewhere.

With the increasing resources that have come to the School, and in accordance with Dr. Edsall's aim to see built up striking departments in the fundamental medical sciences, there was developed first a "School" of Physiology and Biochemistry that has become more conspicuously productive than any other in this country. More than thirty professorships in physiology or equivalent subjects in medical schools scattered over the world are now occupied by men who have obtained most of their essential training here. Similar opportunities for professional training in pathology, bacteriology, immunology and protozoology are being developed as rapidly as possible and the Department of Anatomy is becoming a recognized center for neuro-anatomical training. The clinical departments, naturally, have also shared in the School's prosperity. The various hospitals have developed, have been brought into close working relation with the School and are organized on a much more academic basis than formerly. Every M. G. H. man looks with pride on what has occurred there within the last few years—the growth of laboratories and investigative work, the making over of the Bulfinch Building, the establishment of the Baker Ward.

Every City Hospital graduate realizes the importance of what has happened in that institution, through the opening of the Thorndike Memorial Laboratory and the Mallory Institute of Pathology. The Children's Hospital has grown from a hospital pretending to offer no more than a sound clinical training in pediatrics to one that in its clinical, research, hygiene and sociological relations is now looked upon as one of the leading American pediatric clinics. The Huntington Hospital, the Eye and Ear Infirmary, the Peter Bent Brigham Hospital, the Beth Israel Hospital and the Lying-In Hospital all have become more firmly welded to the School, more definitely a part of it, more eager to help in carrying the load of teaching and research.

The tangible result of such a constructive policy of growth and expansion as that outlined and pursued by Dr. Edsall during his deanship has been twofold. Investigation at Harvard has flourished. The teaching of clinical medicine has improved.

In 1910 only about twenty of our professors and an equal number of junior men working under their guidance could be said to be engaged in serious scientific medical research. Now there are about

two hundred men constantly at work. There can be little doubt that the School has acquired the reputation of being one of the foremost places in the country for medical investigation and for the advanced training of medical teachers. The results of a large amount of active, intelligent curiosity covering a wide range of subjects will always serve the people greatly. To realize this, one has only to think of the School's work on liver extract in relation to pernicious anemia, which President Lowell termed a discovery to mankind worth all our expenditures upon research.

The teaching of medicine to undergraduate medical students has shown an equally striking improvement. One of the important changes that has come about is that little by little the Medical School has crept into the consciousness of the rest of the University. Before Dean Edsall's time the Medical School was an isolated appendage seemingly far off from the College proper, and with but little relation to it. Now, by several liaisons, the School feels itself a definite part of all that Harvard means—an important change to our students because the future progress of Medicine in all probability must be intimately correlated with the progress of all biological sciences, economics, sociology, and even of law and business.

The general organization of the course of medical training, its objectives, and its details have been fundamentally altered in many ways. Increase in knowledge and methods, together with increasingly rigid regulations by official bodies, had led to a stereotyped course packed full of required matter with but little time left for the individual student to develop independent judgment and initiative.

During Dr. Edsall's deanship the pressure has been largely turned in the opposite direction. A general change in the curriculum was established which freed the students entirely for two afternoons a week, thus limiting the amount of daytime work which might be required of them, and the tutorial plan was established for men of exceptional ability. These steps have had far-reaching effects, for now the majority of the men tend to work as students of medicine rather than as applicants for a license through examinations. They have wider interests, do much more reading and advanced work beyond that which is required. They are less interested in studying for grades and more interested in acquiring education. They have an opportunity to take a variety of elective or voluntary courses whereby they may come into close relationship with an inspiring teacher whom otherwise they might miss.

They are better trained as clinicians. They are meticulously followed, and their individualities are better known. The provision for the financially poor student has been improved through loan funds, increase in scholarships and a well organized student employment bureau, so that now nearly half the students receive some form of help during their medical school careers. The brilliant student has come to be regarded as the most precious material of all and he is encouraged, helped and guided as carefully as possible. All the students are happier than they were and recognize that they are an important part of the School. As a result of the opportunities known to exist here and our way of doing things, more and more men outside of New England wish to train here. In 1910 about two-thirds of our undergraduate population came from the environs of Boston; and now only about one-third come from this vicinity. A great many admirable students with determination to take from the School all that they can of knowledge and inspiration come to us from the South and the West. We have indeed become a national medical school instead of a local one.

Such, in brief, is the story of Dr. Edsall and some of his accomplishments at the School during the early part of the twentieth century. At a Tavern Club dinner last winter, Mr. Lowell remarked, apropos of Harvard, that any constructive

labor is in the nature of a work of art, and no one is more aware of the defects of what he has done than the artist himself. When he has finished his picture as well as his skill permits, he takes it and hangs it up beside the altar saying, "I am sorry that it is not better, but in the time for work allotted, it is the best that I could do."

David Edsall during the time allotted to him as Dean of the Medical School has proved himself a great artist. The picture which he has painted so carefully and skillfully, will hang beside the altar among Harvard's most treasured offerings.

I wish that Dr. Shattuck were here once more to speak for the Faculty and medical alumni, to compliment Dr. Edsall gracefully and whimsically on all that has been accomplished during his time of office and to end by saying with much feeling, "It seems not inappropriate to paraphrase the words of another robust David, 'One generation of Harvard men shall praise thy works to another, and shall declare thy mighty acts.' *Ave sed non vale!*"

Development of The School of Public Health

By Cecil K. Drinker, M.D.

IN the fall of 1908, when I entered the Medical School of the University of Pennsylvania, I remember very well that one of my friends in the fourth-year class pointed out a tall and to me very formidable looking man who, he said, was Dr. Edsall, and further that Dr. Edsall was a sort of curiosity to many of the students in that he not only was a fine clinician but also interested in chemistry and in working in a laboratory. In December of the same year, Dr. Edsall wrote a paper entitled "A Disorder Due to Exposure to Intense Heat." This was the first published expression of his interest in industrial hygiene. It was soon followed by another on "Some of the Relations of Occupations to Medicine," and then by others, all expressive of an increasing interest in industrial medicine and all pointing out the large opportunity for research presented by the field of industrial medicine.

In 1908, and indeed for many years after, the general field of industrial medicine was looked upon as hardly reputable. Most of the men in it had been relatively unsuccessful in general practice and had been only too glad to take a salaried position, even though their duties were mainly of medico-legal type, and often legal medicine of not too good a flavor. On coming to Boston in 1912, as Jackson Professor of Clinical Medicine, Dr. Edsall again found opportunity to work constructively in the field. He began by requiring that the out-patient histories at the Massachusetts General Hospital give a better account of the industrial life of the patient, and after a time he was instrumental in establishing an industrial clinic at the Hospital which lasted for several years under the guidance of Dr. Wade Wright and proved valuable in displaying many lines in which industrial medical research might move.

When Dr. Edsall became Dean of the Harvard Medical School in 1918, he found in existence the school for health officers which had been established through the energy and foresight of Dr. Rosenau and Professors Whipple and Sedgwick in 1913. This school was a joint enterprise of Harvard University and the Massachusetts Institute of Technology. Dr. Edsall had no direct part in the school for health officers, but from the very beginning of his associa-

tion with the Medical School, he was greatly interested in Dr. Rosenau's course in Preventive Medicine and Hygiene for the medical students and in the problem of seeing that these students gained the point of view of preventive medicine and of public health.

During the war, Dr. Frederick C. Shattuck became interested in the problems of industrial hygiene and with characteristic energy set himself the task of collecting a fund to cover the expense of teaching and research in this field. He secured $125,000, which was administered by a small committee in the Medical School, of which Dr. Edsall at once became a member. It thus happened that in 1918 when Dr. Edsall became Dean of the Medical School, there were in operation two substantial activities in hygiene, the Harvard-Technology School of Public Health and the enterprise in industrial hygiene which had become allied to Physiology in the Medical School and was beginning active work both in teaching and research.

Dr. Edsall's interest in industrial hygiene, which had been further stimulated by his activities as a consultant of the government for problems in this field which arose during the War, caused him to be constantly and vitally involved in all that the new division of industrial hygiene undertook. He took part personally in the first investigation and publication from the division, a description of chronic manganese poisoning derived from an examination of thirty-seven cases of the disease. To this presentation of case records it was possible to add direction for the elimination of an industrial hazard new in the United States and little understood in Europe. Dr. Edsall's influence was at once asserted in securing additional funds for the laboratory investigation of manganese poisoning; then for extensive examinations of lead poisoning and of the general hygienic position of zinc.

In addition to this development of research, he became the first editor of the Journal of Industrial Hygiene, published by the new division in the Medical School to provide a medium for publication in this field. This journal was to establish the research standards which Dr. Edsall knew were required in industrial medicine and hygiene.

These constant activities in the field of public health inevitably brought Dr. Edsall in contact with the International Health Board of the Rockefeller Foundation, and in 1921 resulted in a proposal from the Foundation that a School of Public Health be established at Harvard University. My good fortune, in having an occasional part in the negotiations which preceded the Rockefeller gift, makes me feel sure that one of the chief considerations in the minds of those in control of the Foundation was their confidence that in Dr. Edsall the school would have a leader who would guide it through the difficult problems of organization and would, above all else, see to it that the school operated as a graduate activity of the University and not as a simple vocational establishment out of accord with University traditions.

From the very beginning Dr. Edsall insisted that the new school be closely affiliated with the Medical School and with the other departments of the University. He felt strongly that public health would advance in two ways, first by virtue of research in public health, and secondly by seeing to it that the departments in the Medical School, in the Engineering School, and later even in the Business School were steadily confronted with the idea of preventive work.

The Rockefeller Foundation, in its gift, provided a fund for a building. It was an inspiration on Dr. Edsall's part to suggest the purchase of the Infants' Hospital, and when this purchase was completed the new School of Public Health not only found itself in possession of a building well adapted to its early necessities, but the Infants' Hospital also benefited by the change and amalgamation with the Children's Hospital. The economy the Uni-

versity effected by purchase of a building already standing was appreciated by the Foundation, and it agreed that the money saved should be used gradually for the construction of laboratories and other necessary general equipment. In budgeting the School of Public Health, Dr. Edsall allotted funds to Medical School departments such as Bacteriology, Preventive Medicine and Hygiene, Tropical Medicine, Comparative Pathology and others.

Two years after the founding of the School of Public Health, Dr. Edsall became a member of the International Health Board of the Rockefeller Foundation. When this Board was disbanded in 1927, he became a trustee of the Foundation and almost at once a member of its executive committee. These positions he still holds. At the request of the Foundation, Dr. Edsall made trips to England, China, Mexico, and the southern states. These journeys increased his interest in the general problems of public health and were invaluable in fitting him for developing education in public health both in this country and abroad.

The early days of the School of Public Health were discouraging to many of us. There were few students and their preparation was often woefully bad. There was pressure for the establishment of short courses of instruction, with lowering of standards, so that men who at least had some training in public health could be supplied to health departments. These difficulties affected Dr. Edsall not at all. The new school was a University activity and standards of instruction must be University standards. Students would come. He foresaw what is already coming to pass, that this country would soon have a real profession of public health unhampered by political interference, and that the best positions available would go invariably to men with special training. As his tenure of the deanship of the new school closed, he witnessed the development of social legislation which must increase health departments throughout the entire country. Increasing national emphasis on public health has at once expressed itself both in the quality and in the number of students coming to the school, so that in this year as Dr. Edsall's deanship terminates, the child he nourished so carefully is almost in full growth.

Whatever one's sympathies may be with the present trend toward socialization of medicine and expansion of public health work, it must be agreed that the whole movement will be more safely ordered through men who have had training in schools equipped for graduate instruction in public health and not by men who have jumped blindly from medicine. That the University is prepared for this situation is due pre-eminently to the foresight and persistence of Dr. Edsall.

IN HONOR OF DR. EDSALL

An afternoon meeting and testimonial dinner in honor of Dr. David L. Edsall were held in Boston on Oct. 23, on the occasion of his retiring as Dean of the Harvard Medical School and School of Public Health.

The meeting at the Medical School was presided over by Dr. Walter B. Cannon. The speakers were Dr. Walter A. Jessup, president of the Carnegie Foundation for the Advancement of Teaching, Dr. Eugene DuBois, Professor of Medicine, Cornell University, and Dr. Lawrence J. Henderson, Professor of Chemistry, Harvard University.

The dinner was given at the Harvard Club of Boston.

DR LOCKE GOES TO WILLIAMS

Dr. Edwin A. Locke, president of the Harvard Medical Alumni Association, has been appointed Director of Health in Williams College, Williamstown, Mass. The appointment became effective this Autumn and Dr. Locke will give his entire time as head of the Department of Health and Athletics.

TREASURER'S REPORT

ACTUAL RECEIPTS SEPT. 15, 1934—SEPT. 15, 1935

	Sept. 15-June 3	June 3-Sept. 15	Total Receipts
1934-35 Appeals	$2,592.05	$164.33	$2,759.38
Advertising	922.00	172.00	1,094.00
Annual Meeting		53.00	53.00
	$3,514.05	$389.33	$3,903.38

ACTUAL EXPENDITURES SEPT. 15, 1934—SEPT. 15, 1935

	Sept. 15-June 3	June 3-Sept. 15	Total Expenditures
Cost of BULLETIN	$958.49	$337.86	$1,296.35
Cost of Appeals	92.00	114.86	206.86
Salaries	825.01	274.99	1,100.00
Incidentals	35.02	8.47	43.49
Commencement Fee	50.00		50.00
Dinner to Fourth-Year Class	7.34	144.65	151.99
Annual Meeting		54.00	54.00
Rooms in Vanderbilt Hall	980.00		980.00
Bank Charges	4.56		4.56
	$2,952.42	$934.83	$3,887.25

Actual Receipts—Sept. 15, 1934—Sept. 15, 1935	$3,903.38	
Actual Expenditures—Sept. 15, 1934—Sept. 15, 1935	3,887.25	
Surplus—Sept. 15, 1935		$ 16.13
Bank Balance Sept. 15, 1934		1,237.05
Bank Balance Sept. 15, 1935		$1,253.18

Respectfully submitted,
HENRY H. FAXON, M.D., *Treasurer*

ANNUAL MEETING

The annual meeting of the Harvard Medical Alumni Association was held on June 3, 1935, at the Hotel Statler, following a luncheon. The treasurer's and secretary's reports were read and accepted. The following men, nominated by a committee appointed by President Locke, were elected to serve as councillors of the Association during the next three years: Doctors Harrison Chase of Brockton, Mass., Ralph French of Fall River, Mass., and Augustus Thorndike of Boston.

Dr. Locke asked for any suggestions or criticisms in regard to the Association's activities. Dr. Calvin G. Page spoke of the need for a trained mycologist in the School and expressed the hope that the temporary appointment of Norman F. Conant, Ph.D., to that position would be continued during the coming year.

CURRENT ACTIVITIES AT THE HARVARD MEDICAL SCHOOL, COURSES FOR GRADUATES

Nov. 4-30. General Course in Internal Medicine. Given by Dr. F. Dennette Adams at the M. G. H.

Nov. 4-30. General Surgery. Given by Staff of the M. G. H.

Nov. and Dec. Proctology. Given by Drs. William A. Rolfe and E. Parker Hayden at the Boston Dispensary and the M. G. H.

Dec. 2-31. General Surgery. Given by Drs. Charles G. Mixter and Jacob Fine and associates at the Beth Israel Hospital.

Jan. 20-Feb. 1. Endocrinology and Metabolism. Given by Dr. Fuller Albright at the M. G. H., 10 a.m. to 1 p.m.

Offered Monthly. Courses in Pediatrics, Roentgenology, Anaesthesia, Genito-Urinary Surgery, Dermatology and Syphilology, and Ophthalmology.

SECRETARY'S ANNUAL REPORT

(Read at the Annual Meeting, June 3, 1935)

Since the last annual meeting of the Harvard Medical Alumni Association, in Vanderbilt Hall Gymnasium, on May 12, 1934, the Officers and Councillors of the Association have met five times.

In accordance with the suggestion made by Dr. Joseph M. Looney at the last annual meeting, a committee was appointed to investigate the teaching of contagious diseases in the School. The committee concluded that the existing instruction is adequate and its report was published in full in the BULLETIN.

Regarding Dr. Looney's question as to instruction in anesthesia, the Council decided that the teaching of anesthesia is taken care of in the School as adequately as possible and that the technical details of this subject must be left to the interneship training.

The Council has been interested in the efficient running of Vanderbilt Hall and through the President of the Association has attempted to investigate means for renting all of the rooms in the Hall. This year 20 rooms remained unoccupied. A reduction in the rental charges will apparently be necessary if all the rooms are to be taken.

It was voted that the Association wishes to take part in the Tercentenary Celebration of Harvard University in September, 1936. The program will be arranged during the coming year.

The suggestion has been made in the past that the Alumni Association hold its annual meeting every third year in conjunction with the annual meeting of the American Medical Association. The Council considered that in as much as Boston is the center of Alumni and School activities it is probably best to continue to hold the annual meetings here.

The question of the class of advertising acceptable for publication in the BULLETIN was discussed this year. It was agreed that a high standard should be maintained. Though in some instances products not accepted by the Council of Pharmacy and Chemistry of the A. M. A. might be acceptable, it was decided that the treasurer and secretary of the Association should pass on the acceptability of any advertising copy which might be questionable.

It was voted to contribute $50 this year towards the expenses of the University Commencement.

The Council considered it suitable for the Alumni Association to sponsor the dinner which is to be given next Fall in honor of Dean Edsall, who retires this June. The Autumn number of the Bulletin is to be devoted to a review of the progress of the School during Dr. Edsall's administration.

It was voted that a dinner be held in Atlantic City on Wednesday evening, June 12, for alumni who may be attending the A. M. A. convention.

Three new councillors are to be elected at the present meeting to succeed, for a period of three years, Doctors Forbes, Leavitt and Garland, who retire this year.

Respectfully submitted,

VERNON P. WILLIAMS, M.D.,
Secretary.

BOOK REVIEW

Tumors of the Female Pelvic Organs. By Joe V. Meigs, M.D. '19. With a foreword by Robert B. Greenough, M.D. '96. Cloth, $6. Pp. 533, with 261 illustrations. MacMillan.

An interesting practical approach to the consideration of pelvic pathology has recently been published by Dr. Joe Vincent Meigs in his book Tumors of the Female Pelvic Organs. An increasing interest in gynecology is manifest in the literature with particular emphasis on the physiological aspects of the problem. As a background for the theoretical discussions regarding the etiology of tumor growth one must have a thorough comprehension of the end results as shown by the pathology of tumors.

The material in Dr. Meigs' excellent book has been painstakingly reviewed from the pathological side and one may rely absolutely on the statistics presented. Yet it is not necessary to be an accomplished or even an embryonic pathologist to derive any benefit from its pages. The appeal of the book is general, for much may be learned to the profit of medical student, gynecologist, general surgeon and practitioner alike. Confronted with an ovarian tumor it is a satisfaction to know how to deal with remaining ovary and uterus and a comfort to give some prognosis following the treatment instituted. Its practical side stresses "what to look for" and "when to do what." Dr. Meigs obviously knows his subject, and has written a book which is easily read and understood and which, because it approaches the problem with pathology as the fundamental basis, will not be outmoded.

LANGDON PARSONS, M.D.

CLASS OF 1930 REUNION

The class of 1930 held its fifth reunion on June 3, 1935, at the Harvard Club in Boston. "Dutch" Ludwig was the master of ceremonies and Soma Weiss was the principal speaker.

RECENT BOOKS BY HARVARD MEDICAL ALUMNI

'79—John B. Wheeler, Professor *emeritus* of Surgery at the College of Medicine, University of Vermont, and former president of the New England Surgical Society, "Memoirs of a Small-Town Surgeon." Stokes. Pages, 344. Price $3.

'80—George L. Walton, "The Flower-Finder." Fourth, revised edition. The author has practiced medicine, specializing in neurology, in Boston since 1883. Lippincott. Pages, 419. Price $2.50.

'90—Joel E. Goldthwait, formerly chief of the orthopaedic services at the Massachusetts General and Carney Hospitals, Boston, (with others), "Body Mechanics in the Study and Treatment of Disease." Lippincott. Pages, 281. Price, $4.

'98—Hugh Cabot, a member of the Board of Overseers of Harvard College, "The Doctor's Bill." Discussion of medical practice of the present and of the future in its relation to modern social and economic problems.

'17—Adrian G. Gould, assistant medical adviser and Assistant Professor of Hygiene at Cornell University, "A College Textbook of Hygiene." Revised edition. Macmillan. Pages, 768. Price, $3. Also, "Community Hygiene." Revised edition. Pages, 383. Price, $2. Both these volumes have also been published in a revised edition under the title "A College Textbook of Hygiene and Community Hygiene." Macmillan. Price, $3.

'18—Fred G. Holmes, "Tuberculosis." A manual for the patient, containing information about symptoms, treatment, complications, and aids to recovery. Appleton-Century. Pages, 319. Price, $2.

'20—Lawrence W. Smith, formerly Assistant Professor of Pathology at the Harvard Medical School, (with another), "Poliomyelitis." Macmillan. Pages, 286. Price, $3.

RECENT BOOKS BY FACULTY OF HARVARD MEDICAL SCHOOL

Richard P. Strong, Professor of Tropical Medicine at the Harvard Medical School, "Onchocerciasis." Covering the results of two expeditions to Guatemala. Harvard University Press. Pages, 234. Price, $5, cloth, and $4, paper.

Hans Zinsser, Professor of Bacteriology and Immunology at the Harvard Medical School, "Rats, Lice, and History." "Being a study in biography, which, after twelve preliminary chapters, indispensable for the preparation of the lay reader, deals with the history of typhus fever." An Atlantic Monthly Press publication. Little, Brown. Pages, 313. Price, $2.75.

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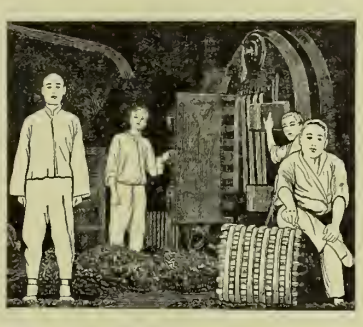

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HARVARD MEDICAL SCHOOL

The George W. Gay Lecture on
"Medical Ethics"

Amphitheatre C at 5 P. M.

Thursday, November 7—Dr. James B. Herrick of Chicago.

Lectures on
"The Care of the Patient"

Amphitheatre C at 5 P. M.

Thursday, November 14—Dr. Arthur R. Crandell of Taunton.

Thursday, November 21—Dr. David D. Scannell of Boston.

NECROLOGY

'72—Julian Augustine Chase died at Pawtucket, R. I., August 12, 1935, of chronic myocarditis.

'78—Jonas Edward Bacon died at Brockton, Mass., July 31, 1935, of chronic myocarditis and arteriosclerosis.

'82—George N. Miller died at Poughkeepsie on July 30, 1935, of injuries received in an automobile accident.

'85—William Donnison Swan died at Annisquam, Mass., June 25, 1935, of a heart attack.

'86—Edward Lambert Twombly died at Boston, Mass., May 10, 1935, of a heart attack.

'90—Franklin Sawyer Palmer died at Seattle, Wash., June 5, 1935.

'91-92—Thomas Lewis Kendall died at Buzzards Bay, Mass., July 15, 1935.

'94—John Joseph Dowling died at Boston, Mass., July 10, 1935, of cerebral thrombosis.

'96—John A. MacIsaac died at New York on August 16, 1935.

'98—Clifford Henry Griffin died at Providence, R. I., April 1, 1935.

'98—William Ropes May died at New York City, May 3, 1935, of a heart attack.

'00—Frederick Bryant died at Hull, Mass., July 29, 1935, of cerebral hemorrhage and chronic myocarditis.

'02—Ross McPherson died at New York, August 16, 1935, of cerebral hemorrhage.

'04—George W. Clarke died at San Diego, Calif., May 14, 1935.

'04—Herbert William Ellam died at Melrose, Mass., June 4, 1935.

'09—Duncan Campbell Smyth died at Boston, Mass., June 11, 1935, of cerebral hemorrhage.

'10—George Napoleon Gaboury died at Springfield, Mass., June 4, 1935.

'13—John Joseph Murphy died at North Conway, N. H., July 8, 1935, of pulmonary hemorrhage.

ALUMNI NOTES

'90—William E. Chenery, Professor *emeritus* of Laryngology at Tufts College Medical School, has been elected president of the Friends of China, Inc., Boston.

'90—Frank B. Mallory has received the Gold Headed Cane of the American Association of Pathologists and Bacteriologists. The cane was given to the Association by Harold C. Ernst, for many years Professor of Bacteriology at the Harvard Medical School.

'92—Richard C. Cabot, Professor *emeritus* of Social Ethics and of Clinical Medicine at Harvard, spoke on "The Services Furnished by Jewish Ideals to American Life" at the opening of Jewish book-week in Boston.

'92—Charles E. Mongan, of Somerville, has been elected president of the Massachusetts Medical Society.

'95—Harvey Cushing has received one of the gold medals awarded by the National Institute of Social Sciences in recognition of distinguished services rendered to humanity.

'95-98—Fletcher G. Sanborn has retired from active practice and from his position as manager and chief medical officer of the Veterans' Administration, Hawaiian Islands.

'00—Walter B. Cannon, George Higginson Professor of Physiology at the Harvard Medical School, was guest speaker at the annual meeting of the Sigma Xi Club of Peking, held on May 17.

'03—Robert J. Graves, of Concord, N. H., has been elected president of the New Hampshire Surgical Club.

'03—Philip H. Cook has been elected chairman of the Section on Radiology and Physiotherapy of the Massachusetts Medical Society. Cook is a diplomate of the American Board of Radiology.

'03—S. Burt Wolbach, Shattuck Professor of Pathological Anatomy at the Harvard Medical School, will receive one-half the laboratory award of $5,000, offered by Mead, Johnson & Company, for his "basic work on the pathology of avitaminosis A and his investigations on the regeneration of epithelial tissue impaired by vitamin A deficiency, and the relationship of vitamin A to the integrity of the teeth." The award is assigned "to the investigator or group of investigators producing the most conclusive research on the vitamin A requirements of human beings."

'04—Harry Linenthal has been elected president of the Greater Boston Medical Society.

'05—William E. Eaton, commander in the medical corps of the U. S. Navy, is now chief of the medical service at the Naval Hospital, Newport, R. I.